PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUL rEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be

appropriate. All further indicated unless correct maintenance fee notifies	correspondence includi- ted below or directed of	ng the Patent, advance of herwise in Block I, by (rders and notification of r a) specifying a new corres	naintenance fees w spondence address;	ill be mai and/or (b	iled to the current indicating a sepa	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Feo(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
32641	7590 05/1	/2007	have				
DIGEO, INC C/O STOEL RIVES LLP 201 SOUTH MAIN STREET, SUITE 1100 ONE UTAH CENTER SALT LAKE CITY, UT 84111				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
SALI LAKE C	11 1, 01 64111						(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNE	EY DOCKET NO.	CONFIRMATION NO
09/954,915	09/954,915 09/17/2001		Mark Peting		50	8610	
APPLN. TYPE	SYSTEM AND METH	ISSUE FEE DUE	TLY DEMODULATING				_
nonprovisional				PREV. PAID ISSUE	FEE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	08/13/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS				
TRAN, KHAI		261 I	375-316000				
I. Change of correspondence address or indication of "Fee Address" (CF I. 56). Change of correspondence address (or Change of Corresponde Address form "FIO/SBI 122) attached. Dee Address" indication (or "Fee Address" Indication form FIO/SBI47, Ro. U3-02 or more recent) attached. Use of a Custon Number is required.			2. For printing on the pattern front page, list (I) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered pattern attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unificordation as set fort (A) NAME OF ASSIGNATION (A) Digeo,	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE Inc.	fied below, no assignee eletion of this form is NO	THE PATENT (print or typ data will appear on the pa I a substitute for filing an a (B) RESIDENCE: (CITY Kirkland, V	ntent. If an assigned sssignment. and STATE OR CO Vashington	OUNTRY))	
Please check the appropri	iate assignce category or	categories (will not be pr	inted on the patent):	Individual 🖾 Cor	poration o	r other private grou	p entity Government
4a. The following fee(s) are submitted: 23 Issue Fee 29 Publication Fee (No small entity discount permitted) 20 Advance Order - # of Copies 5. Change in Entity Status (from status indicated above)			Phyment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☑ Phyment by reducti and. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment. Deposit Account wather 502375 (enclose an extra copy of this form).				
	tus (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no long	er claiming SMALI	ENTITY	status San 27 CE	2 1 22(-)(2)
			from anyone other than th Office.	e applicant; a regist	ered attorn	ney or agent; or the	assignce or other party in
	/Kory D. Chr				y 30,		
Typed or printed name				Registration No.	43	,548	
This collection of informa an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V. Alexandria, Virginia 223	ation is required by 37 Cliality is governed by 35 application form to the ones for reducing this buringinia 22313-1450. DO 13-1450.	FR 1.311. The informatio U.S.C. 122 and 37 CFR I USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	n is required to obtain or re 1.14. This collection is esti- depending upon the indivi- Chief Information Officer COMPLETED FORMS TO	tain a benefit by the mated to take 12 mi dual case. Any com , U.S. Patent and Tr THIS ADDRESS:	public wi nutes to c ments on rademark SEND TO	hich is to file (and loomplete, including the amount of time Office, U.S. Depar to Commissioner fo	by the USPTO to process) gathering, preparing, and you require to complete tment of Commerce, P.O. r Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.